## 2007 FOR PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# F05000000532

Entity Name: ADMINSERVER, INC.

FILED Oct 31, 2007 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 2501 SEAPORT DRIVE, SUITE 500 CHESTER, PA 19013 **Current Mailing Address: New Mailing Address:** 2501 SEAPORT DRIVE, SUITE 500 CHESTER, PA 19013 FEI Number: 23-3006030 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 323012525 US The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE: MICHELE SUBERS Electronic Signature of Registered Agent Date In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: CFO () Delete () Change () Addition DOGGETT, CHRISTOPHER Name: Name: 2501 SEAPORT DRIVE, SUITE 500 Address: Address: City-St-Zip: CHESTER, PA 19013 City-St-Zip: Title: Title: () Delete () Change () Addition Name: PRABHU, CHRISTOPHER Name: 2501 SEAPORT DRIVE, SUITE 500 Address: Address: CHESTER, PA 19013 City-St-Zip: City-St-Zip: Title: Title: COO ( ) Delete () Change () Addition HAMILL, ROBERT Name: Name: 2501 SEAPORT DRIVE, SUITE 500 Address: Address: City-St-Zip: CHESTER, PA 19013 City-St-Zip: Title: VΡ () Delete Title: () Change () Addition DOGGETT, PAMELA Name: Name: Address: 2501 SEAPORT DRIVE, SUITE 500 Address: City-St-Zip: CHESTER, PA 19013 City-St-Zip: Title: Title: () Delete () Change () Addition BAMBRICK, JAMES Name: Name: 867 ROUTE 40 Address: Address: WOODSTOWN, NJ 08098 City-St-Zip: City-St-Zip: Title: () Delete Title: () Change () Addition Name: VORA, JAYANT Name: 9 WALLACE STREET, COMMERCIAL UNION HOME Address: Address: City-St-Zip: City-St-Zip: MUMBAI, MU 400001 IN

the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MICHELE SUBERS

DIRE

10/31/2007

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or

Electronic Signature of Signing Officer or Director

Date